Company Tracking Number:

TOI: H16I Individual Health - Major Medical Sub-TOI: H16I.005C Individual - Other

PPACA Amendment Product Name:

Project Name/Number:

Filing at a Glance

Company: Philadelphia American Life Insurance Company

Product Name: PPACA Amendment SERFF Tr Num: NELI-126967685 State: Arkansas State Tr Num: 47548 TOI: H16I Individual Health - Major Medical SERFF Status: Closed-Approved-

Closed

Sub-TOI: H16I.005C Individual - Other Co Tr Num:

Filing Type: Form

Reviewer(s): Rosalind Minor Author: Tony Robert Disposition Date: 01/06/2011

Date Submitted: 01/04/2011 Disposition Status: Approved-

Closed

Implementation Date:

State Status: Approved-Closed

Implementation Date Requested: 09/23/2010

State Filing Description:

General Information

Project Name: Status of Filing in Domicile: Not Filed

Project Number: Date Approved in Domicile: Requested Filing Mode: Review & Approval **Domicile Status Comments:** Explanation for Combination/Other: Market Type: Individual

Submission Type: New Submission

Individual Market Type: Individual Filing Status Changed: 01/06/2011 Overall Rate Impact: State Status Changed: 01/06/2011

Deemer Date: Created By: Tony Robert

Submitted By: Tony Robert Corresponding Filing Tracking Number:

PPACA: Grandfathered Immed Mkt Reforms

PPACA Notes: null Filing Description:

File amendment to conform with PPACA requirements for grandfathered policies. This amendment will apply to policy

form SG1-P(10-03)-AR, acquired from States General Life Insurance Company.

SERFF Tracking Number: NELI-126967685 State: Arkansas 47548

Filing Company: Philadelphia American Life Insurance Company State Tracking Number:

Company Tracking Number:

TOI: H16I Individual Health - Major Medical Sub-TOI: H16I.005C Individual - Other

Product Name: PPACA Amendment

Project Name/Number:

Company Tracking Number:

TOI: H161 Individual Health - Major Medical Sub-TOI: H161.005C Individual - Other

Product Name: PPACA Amendment

Project Name/Number: /

Company and Contact

Filing Contact Information

Tony Robert, Assistant Vice President 200 Westlake Park #1200 Houston, TX 77079

281-368-7268 [FAX]

Filing Company Information

arobert@neweralife.com

281-368-7270 [Phone]

Company Tracking Number:

TOI: H161 Individual Health - Major Medical Sub-TOI: H161.005C Individual - Other

Product Name: PPACA Amendment

Project Name/Number:

Philadelphia American Life Insurance Company CoCode: 67784 State of Domicile: Texas

200 Westlake Park #1200 Group Code: 520 Company Type: Houston, TX 77079 Group Name: State ID Number:

(281) 368-7200 ext. [Phone] FEIN Number: 74-1952955

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No

Fee Explanation:

Per Company: No

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

Philadelphia American Life Insurance Company \$50.00 01/04/2011 43426683

Company Tracking Number:

TOI: H16I Individual Health - Major Medical Sub-TOI: H16I.005C Individual - Other

Product Name: PPACA Amendment

Project Name/Number: /

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved- Closed	Rosalind Minor	01/06/2011	01/06/2011

Company Tracking Number:

TOI: H161 Individual Health - Major Medical Sub-TOI: H161.005C Individual - Other

Product Name: PPACA Amendment

Project Name/Number: /

Disposition

Disposition Date: 01/06/2011

Implementation Date: Status: Approved-Closed

HHS Status: HHS Approved

Comment:

Rate data does NOT apply to filing.

Company Tracking Number:

TOI: H16I Individual Health - Major Medical Sub-TOI: H16I.005C Individual - Other

Product Name: PPACA Amendment

Project Name/Number: /

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification	Approved-Closed	Yes
Supporting Document	Application	Approved-Closed	Yes
Supporting Document	Health - Actuarial Justification	Approved-Closed	Yes
Supporting Document	Outline of Coverage	Approved-Closed	Yes
Supporting Document	PPACA Uniform Compliance Summary	Approved-Closed	Yes
Supporting Document	Notification letter to grandfathered policyholders	Approved-Closed	Yes
Form	Amendment	Approved-Closed	Yes

Company Tracking Number:

TOI: H161 Individual Health - Major Medical Sub-TOI: H161.005C Individual - Other

Product Name: PPACA Amendment

Project Name/Number: /

Form Schedule

Lead Form Number: AMEND.PPACA

Approved- AMEND.PPPolicy/Cont Amendment

Schedule Form Form Type Form Name Action Action Specific Readability Attachment
Item Number Data
Status

Initial

GEN001(PAL

Closed ACA ract/Fratern).pdf

01/06/2011 al

Certificate:
Amendmen
t, Insert
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endorsement or Rider

Amendment

Policy Number [] , issued '	to You	by F	Philadelphia	American	Life	Insurance	Company,	is	hereby
amended, effective September	23, 2010,	as follo	ws:							

- 1. The reference to the age dependent status ends is changed for natural, adopted and step-children of the policyholder to age 26.
- 2. The section entitled TIME LIMIT ON CERTAIN DEFENSES is hereby deleted and replaced by the following:
 - TIME LIMIT ON CERTAIN DEFENSES: After the effective date of coverage, only fraud or an intentional misstatement of a material fact in the application may be used to void (rescind) this coverage. We must give You 30 days prior notice of Our intent to void the coverage. No claim for loss incurred after 2 years from the effective date of coverage shall be reduced or denied on the grounds that the medical condition has existed before the effective date of coverage.
- 3. Effective the next anniversary date of Your policy on or after September 23, 2010, any limitation of benefits based on a Lifetime Maximum is hereby removed.

Bill S. Chen

AMEND.PPACA GEN001(PAL)

Company Tracking Number:

TOI: H161 Individual Health - Major Medical Sub-TOI: H161.005C Individual - Other

Product Name: PPACA Amendment

Project Name/Number:

Supporting Document Schedules

Item Status: Status

Date:

Satisfied - Item: Flesch Certification Approved-Closed 01/06/2011

Comments: Attachment:

Readability_Certification_AMEND.PPACA.pdf

Item Status: Status

Date:

Bypassed - Item: Application Approved-Closed 01/06/2011

Bypass Reason: Not applicable to Amendment filing.

Comments:

Item Status: Status

Date:

Bypassed - Item: Health - Actuarial Justification Approved-Closed 01/06/2011

Bypass Reason: No rate change in connection with this amendment filing.

Comments:

Item Status: Status

Date:

Bypassed - Item: Outline of Coverage Approved-Closed 01/06/2011

Bypass Reason: Not a new product filing.

Comments:

Item Status: Status

Date:

Satisfied - Item: PPACA Uniform Compliance Approved-Closed 01/06/2011

Summary

Comments:

Attachments:

PPACA.GEN001(PAL).AR.pdf

Company Tracking Number:

TOI: H161 Individual Health - Major Medical Sub-TOI: H161.005C Individual - Other

Product Name: PPACA Amendment

Project Name/Number:

PPACA Compliance Section A.pdf

Item Status: Status

Date:

Satisfied - Item: Notification letter to grandfathered Approved-Closed 01/06/2011

policyholders

Comments:

This letter was sent to all affected policyholders on September 23, 2010.

Attachment:

Disclosure letter.pdf

READABILITY CERTIFICATION

I hereby certify that the form listed below meets the minimum reading ease score on a Flesch test basis:

New Form Number	Readability Score
AMEND.PPACA	43.0

James B. Hobelman, FSA, MAAA Second Vice-President & Actuary

Joms M. Milelin

PPACA Uniform Compliance Summary

Please select the appropriate check box below to indicate which product is amended by this filing.
INDIVIDUAL HEALTH BENEFIT PLANS (Complete SECTION A only)
SMALL / LARGE GROUP HEALTH BENEFIT PLANS (Complete SECTION B only)
This form filing compliance summary is to be submitted with your [endorsement][contract] to comply with the immediate market reform equirements of the Patient Protection and Affordable Care Act (PPACA). These PPACA requirements apply only to policies for health insurance overage referred to as "major medical" in the statute, which is comprehensive health coverage that includes PPO and HMO coverage. This form includes the requirements for grandfathered (coverage in effect prior to March 23, 2010) and non-grandfathered plans, and relevant statutes. Refer to the relevant statute to ensure compliance. Complete each item to confirm that diligent consideration has been given to each. (If submitting your filing electronically, bookmark the provision(s) in the form(s) that satisfy the requirement and identify the page/paragraph on this form.)
For all filings, include the Type of Insurance (TOI) in the first column.
Check box if this is a paper filing.

COMPANY INFORMATION

Company Name	NAIC Number	SERFF Tracking Number(s) *if applicable	Form Number(s) of Policy being endorsed	Rate Impact
Rhiladelphia American Life Insurance Co.	67784	NELI-126967685	SG1-P(10-03)-AR	Yes No

Reset Form

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PPACA Uniform Compliance Summary

Eliminate Pre-existing Condition Exclusions for Enrollees Under Age 19	[Sections 2704 and 1255 of the PHSA/Section 1201 of the PPACA]	. N/A	☐ Yes ☐ No If no, please explain.
Explanation:			
Page Number:			
Eliminate Annual Dollar Limits on Essential Benefits Except allows for "restricted" annual dollar limits for essential benefits for plan years prior to January 1, 2014.	[Section 2711 of the PHSA/Section 1001 of the PPACA]	N/A	☐ Yes ☐ No If no, please explain.
Explanation:			
Page Number:			
Eliminate Lifetime Dollar Limits on Essential Benefits	[Section 2711 of the PHSA/Section 1001 of the PPACA]	E Yes □ No If no , please explain.	☐ Yes ☐ No If no, please explain.
Explanation:	-		
Page Number:			
Prohibit Rescissions – Except for fraud or intentional misrepresentation of material fact.	[Section 2712 of the PHSA/Section 1001 of PPACA]	☑ Yes \[\begin{align*}\text{No} \\ \text{If no, please explain.} \end{align*}	☐ Yes ☐ No If no, please explain
Explanation:		1	
Page Number:			

PPACA Uniform Compliance Summary

Category	Statute Section	Grandfathered	Non- Grandfathered
Preventive Services – Requires coverage and prohibits the imposition of cost-sharing for specified preventative services.	[Section 2713 of the PHSA/Section 1001 of the PPACA]	N/A	☐ Yes ☐ No If no, please explain.
Explanation:			
Page Number:			
Extends Dependent Coverage for Children Until age 26 – If [Section 2714 of the a policy offers dependent coverage, it must include dependent [1001 of the PPACA] coverage until age 26.	[Section 2714 of the PHSA/Section 1001 of the PPACA]		☐ Yes ☐ No If no, please explain.
Explanation:			
Page Number:			
Appeals Process – Requires establishment of an internal [Section 2719 of the claims appeal process and external review process.]	[Section 2719 of the PHSA/Section 1001 of the PPACA]	N/A	☐ Yes ☐ No If no, please explain.
Explanation:		1	
Page Number:		Ţ···	
Emergency Services – Requires plans that cover emergency [Section 2719A of the services to provide such coverage without the need for prior 10101 of the PPACA] authorization, regardless of the participating status of the provider, and at the in-network cost-sharing level.	[Section 2719A of the PHSA/Section 10101 of the PPACA]	N/A	☐ Yes ☐ No If no, please explain.
Explanation:			
Page Number:			

PPACA Uniform Compliance Summary

Category	Statute Section	Grandfathered	Non- Grandfathered
Access to Pediatricians – Mandates that if designation of a PCP for a child is required, the person be permitted to designate a physician who specialized in pediatrics as the child's PCP if the provider is in-network.	[Section 2719A of the PHSA/Section 10101 of the PPACA]	N/A	☐ Yes ☐ No If no, please explain.
Explanation:	· · · · · · · · · · · · · · · · · · ·		
Page Number:		·	
Access to OB/GYNs – Prohibits authorization or referral requirements for obstetrical or gynecological care provided by in-network providers who specialize in obstetrics or gynecology.	[Section 2719A of the PHSA/Section 10101 of the PPACA]	N/A	
Explanation:			
Page Number:			

(Date)

Policyholder Name Policyholder Address

Policy # Anniversary date

Re: Policy Amendment to Comply with Patient Protection and Affordable Care Act

Dear Policyholder:

New Era Life Insurance Company believes this coverage is a "grandfathered health plan" under the Patient Protection and Affordable Care Act (the Affordable Care Act). As permitted by the Affordable Care Act, a grandfathered health plan can preserve certain basic health coverage that was already in effect when that law was enacted. Being a grandfathered health plan means that your policy may not include certain consumer protections of the Affordable Care Act that apply to other plans, for example, the requirement for coverage of preventive health services without any cost sharing.

However, grandfathered health plans must comply with certain other consumer protections in the Affordable Care Act, for example, extending coverage for dependent children up to age 26, and the removal of lifetime limits on benefits. Questions regarding which protections apply to a grandfathered health plan can be directed to our Customer Service Department. You may also contact the U.S. Department of Health and Human Services at www.healthcare.gov.

Your policy will be amended based on the requirements of the Affordable Care Act, as well as the Health Insurance Portability and Accountability Act. Removal of lifetime limits on benefits will be effective the next anniversary date of your policy on or after September 23, 2010. The amendment will be filed with your State Department of Insurance and will be forwarded to you as soon as it is approved.

If you have any questions or need additional information, please call 1-800-552-7879, extension 1331.

Sincerely,

Customer Service